

ORIGINAL

FILED
FEB 22 PM 4:16
CLERK, U.S. DISTRICT COURT
SAN FRANCISCO, CALIFORNIA
A
Clerk
FEB 22 PM 4:16
CLERK, U.S. DISTRICT COURT
SAN FRANCISCO, CALIFORNIA
A

1 ELEANOR TUMANENG ANGELES, State Bar #195235
2 ANGELES & ASSOCIATES
2610 Central Avenue, Ste 130
3 Union City, CA 94587
4 (510) 487-7475 office
(510) 487-7275 facsimile

5 Attorney for Petitioner
MING CHEN GEORGE YANG

6

7

8 **IN THE UNITED STATES DISTRICT COURT**

9 **FOR THE NORTHERN DISTRICT OF CALIFORNIA**

VRW

10 **SAN FRANCISCO DIVISION**

11 In the Matter of:

12 CV No 8 MISC 80 023 MISC

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I, MING CHEN GEORGE YANG, declare:
1. I am the Petitioner in this matter and am preparing this declaration in support of
my motion for an order to change the date of birth on my naturalization certificate. I am making
this declaration as to the facts as I know them or as I believe them to be true. If called to
personally testify in court, I would testify honestly and competently as to the matters set forth
below.
2. I was born on February 3, 1941 in Shanghai, China. According to my file with the
United States Citizenship and Immigration Services[“USCIS”], my father prepared an April 23,
1952 Statutory Declaration which stated that my birth date was February 3, 1941. See EXHIBIT
A, which is the USCIS’s February 23, 2007 Decision to deny my request for a change of my birth
date on my naturalization certificate which makes reference to the April 23, 1952 Statutory

DECLARATION OF
MING CHEN GEORGE YANG
IN SUPPORT OF MOTION TO
CHANGE DATE OF BIRTH ON
PETITIONER’S CERTIFICATE
OF NATURALIZATION

Hearing date:
Time:

DECLARATION OF MING CHEN GEORGE YANG IN SUPPORT OF MOTION TO
CHANGE DATE OF BIRTH ON NATURALIZATION CERTIFICATE

1 Declaration. I do not have an official birth certificate because as explained in EXHIBIT A,
2 attached to the April 23, 1952 Statutory Declaration was a statement from the Vice Consul of the
3 United States which indicated that a birth certificate was not available for me "because the
4 Government of China does not maintain the pertinent record." See EXHIBIT A, which makes
5 reference to the Vice Consul's statement.

6 3. S sometime in 1958 when I was 17 years old, my parents sought political asylum
7 from the Communist regime in China and my family was thereafter sponsored by the World
8 Council of Churches. On August 19, 1958, I was issued a Certificate of Identity by an
9 Immigration Officer in Hong Kong, which stated that my birth date was February 3, 1941. See
10 EXHIBIT B, which is my Certificate of Identity. After my family was granted asylum, I used this
11 Certificate of Identity, which served as a national passport, to enter the United States as a lawful
12 permanent resident on February 11, 1959.

13 4. In 1963, I became eligible to become a U.S. citizen and therefore submitted a
14 March 11, 1963 Declaration of Intent to become a U.S. citizen. See EXHIBIT C, which is my
15 March 11, 1963 Declaration of Intent. My March 11, 1963 Declaration of Intent and my initial
16 application for naturalization state that my birth date is February 3, 1941. See EXHIBIT C.
17 Therefore, up until this time, I had always believed that February 3, 1941 was my birth date and
18 as such I used that birth date on my immigration and naturalization documents.

19 5. S sometime after I submitted my naturalization application, my sister and I received
20 information from our parents that our dates of birth were allegedly reported incorrectly to the
21 Hong Kong government as the result of an incorrect conversion from the Chinese Lunar Year to
22 the Western calendar. I did not doubt nor question this information from my parents regarding
23 our birth dates because as a young adult in 1964, I had deferred to my parents' information and
24 instructions, especially because they were more knowledgeable than me about Chinese culture
25 and tradition. Accordingly, I submitted a letter on March 3, 1964 to request that my birth date be
26 changed from February 3, 1941 to February 3, 1942, the date my parents had told me was my
27 actual birth date. See EXHIBIT D, which is the March 3, 1964 Letter. On June 9, 1964, I
28

1 obtained my citizenship and a certificate of naturalization indicating my date of birth as February
2 3, 1942.

3 6. Years later, I discovered that my parents were actually incorrect in their
4 determination that they had reported my sister's and my birth dates to the Hong Kong
5 government based on an erroneous conversion from the Chinese Lunar calendar to the Western
6 calendar. I eventually learned from my father that my parents had believed that there was an
7 incorrect conversion of my birth date because my parents thought that my birth date should be
8 listed as February 3, 1942 in order to comply with the Chinese Lunar calendar. By complying
9 with the Chinese Lunar calendar and listing my birth date as February 3, 1942, my parents
10 believed that it would make me a year younger according to the Chinese Lunar calendar so that
11 my birth year and age would then be consistent. As such, my parents had believed that since I
12 was born before the new year according to the Chinese Lunar calendar, then I would have been
13 already one year old on my actual birth date of February 3, 1941 according to the Chinese Lunar
14 calendar. Therefore, when my parents told me in 1964 that there was an incorrect conversion of
15 my birth date from the Chinese Lunar calendar to the Western calendar, they were under the
16 assumption that February 3, 1942 was my correct birth date based on their belief that the new
17 year in 1941 fell after February 3, 1941.

18 7. I discovered that my parents were incorrect in their belief that my birth date was
19 February 3, 1942 because the Chinese New Year in 1941 began on January 27, 1941, which
20 means that my actual birth date of February 3, 1941 fell *after* the Chinese New Year.¹ This
21 means that my birth date of February 3, 1941 coincided with my actual age according to both the
22 Chinese Lunar calendar and Western calendar. In other words, on my birthday in 1942, I was one
23 year old according to both calendars.

24 8. Because I had discovered that February 3, 1941 was my true date of birth, I never
25

26 27 28 ¹ According to the website at <http://www.asia-home.com/china/lunarcal.php>, the New
year began on Jan. 27, 1941. Also, February 3, 1941 was the 8th day of the new year on the
Chinese Lunar calendar. [<http://www.chinesefortunecalendar.com/TDB/lunarcal1.asp>]

1 officially changed my date of birth with any other governmental agency or on any other record or
2 document, including with the Social Security Administration and the California State Department
3 Motor Vehicles, as all of these records indicated my birth date as February 3, 1941. Accordingly,
4 I continued to use February 3, 1941 as my actual birth date. An April 2007 Report on
5 Confidential Social Security Benefit Information lists my date of birth as February 3, 1941. See
6 EXHIBIT E, the April 2007 Report on Confidential Social Security Benefit Information. On my
7 California Driver's License, my date of birth is stated as February 3, 1941. See EXHIBIT F, my
8 California Driver's License. Documents from Medicare, the California State Teacher's
9 Retirement System, Kaiser Permanente (my health insurance), and my employment records also
10 indicate that my birth date is February 3, 1941. See EXHIBITS G, H, I, and J, the documents
11 from Medicare, the California State Teacher's Retirement System, Kaiser Permanente, and my
12 employment records.

13 9. I had not previously requested a change of my birth date on my naturalization
14 certificate because it had not become an issue until I sought to update my passport to indicate my
15 true birth date of February 3, 1941. I was instructed that my passport could not be updated to
16 indicate my true birth date until I had my naturalization certificate changed to reflect my actual
17 birth date. Moreover, I had become concerned that there would be an issue of a double identity if
18 my naturalization certificate and passport indicated a different birth date than my other official
19 documents, including my drivers' license and Social Security information.

20 10. Accordingly, I attempted to change my birth date on my naturalization certificate
21 by first sending a letter to the USCIS in San Francisco then later submitting a Form N-565,
22 Request for Replacement of Naturalization/Citizenship Document, with the USCIS in order to
23 obtain an amended certificate of naturalization, which would indicate my true and correct birth
24 date of February 3, 1941. However, the USCIS denied my request on February 23, 2007. See
25 EXHIBIT A.

26 ///

27 ///

28

1 I declare under penalty of perjury under the laws of the state of California that the
2 foregoing is true and correct.

3 Executed in Union City, California, this 23rd day of July, 2007.

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7 MING CHEN GEORGE YANG
8 Petitioner
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U.S. Department of Homeland Security
630 Sansome Street, Citizenship Branch
San Francisco, CA 94111



**U.S. Citizenship
and Immigration
Services**

Ming Chen George Yang
89 Basinside Way
Alameda, CA 94502

Refer to File Number:
A 11 575 956/CB

FEB 23 2008

DECISION

Upon consideration, it is ordered that your Form N-565, Application for Replacement Naturalization/Citizenship document, be denied for the following reason(s):

See Attachment

If you desire to appeal this decision, you may do so. Your notice of appeal must be filed within 30 days from the date of this notice (33 days if this notice was received by mail). If no appeal is filed within the time allowed, this decision is final. Appeal in your case may be made to:

Administrative Appeals Unit in Washington, D.C. on the enclosed Form I-290B.
(A fee of \$385.00 is required).

If an appeal is desired, the Notice of Appeal shall be executed and filed with this office, together with the required fee. A brief or other written statement in support of your appeal may be submitted with the Notice of Appeal.

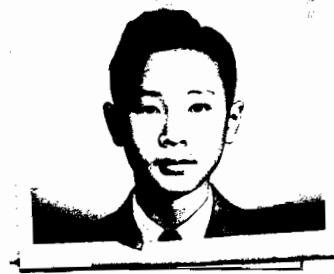
Any question that you may have will be answered by the local immigration office nearest your residence, or at the address shown in the heading to this letter.

Sincerely yours,

A handwritten signature in black ink, appearing to read "David N. Still".
David N. Still
District Director

Enclosure: Attachment to Form I-290B

cc: A handwritten signature in black ink, appearing to read "Eleanor T. Angeles".



Signature of Holder.

杨 元亮

DESCRIPTION.

Age 17
 Height 5' 6"
 Hair Black
 Eyes Dark brown
 Face Oval
 Nose Oriental
 Special peculiarities nil

Remarks:—

Valid for travel to U.S.A.
 via all necessary countries
 enroute.

This Certificate is not available
 during its validity for the holder's
 return to Hong Kong without visa.

FEE \$24.00 PAID

Shroff's Signature

Date

Date 19th August, 1958.

Authority issuing Certificate:—Immigration Officer.

Place of issue of Certificate:—HONG KONG.

CERTIFICATE OF IDENTITY

18th August, 1959.

The present certificate is issued for the sole purpose of providing the holder with identity papers in lieu of a national passport. It is without prejudice to and in no way affects the national status of the holder. If the holder obtains a national passport it ceases to be valid and must be surrendered to the issuing authority.

Surname YANG
 Forenames Ming Chen
 Date of Birth 3.2.1941
 Place of Birth Shanghai, China
 Nationality of origin Chinese
 Surname and forename of Father YANG Yuan Liang
 Surname and forename of Mother YANG LIEU Ying Sih
 Name of Wife (husband) nil
 Names of children nil
 Occupation Student
 Former residence abroad China
 Present residence in Hong Kong 450, Chatham Road, 3rd floor, Kowloon.
 Hong Kong Identity Card No.

The undersigned certifies that the photograph and signature hereon are those of the bearer of the present document.

Signature of the issuing authority.

Immigration Officer.

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEForm approved.
Budget Bureau No. 43-R076.5.

Alien Registration No. [REDACTED]

TRIPPLICATE

(To be given to
declarant when
originally issued)

UNITED STATES OF AMERICA

129.

DECLARATION OF INTENTION

UNITED STATES OF AMERICA
NORTHERN DISTRICT OF TEXASIn the United States District Court
Northern District of Texas at Lubbock

(1) My full, true, and correct name is

MING-CHEN GEORGE YANG

(Full, true name, without abbreviation, and any

(other name which has been used, must appear here)

residence is McDonald Hall, Wayland College, Plainview, Texas

(Number and street)

(City or town)

(County)

(State)

(3) I was born Feb. 3, 1941

(Month) (Day) (Year)

in Shanghai

(County, district, province, or State)

(Country)

(4) My personal description is as follows: Sex male, complexion yellow, color of eyes brown, color of hair dark, height 5 feet 2 inches, weight 120 pounds, visible distinctive marks DD. Republic of China (Refugee to Hong-Kong) Country of which I am a citizen, subject, or national. (5) I am not married; the name of my wife or husband is. (6) My lawful admission for permanent residence in the United States was at Honolulu, T.H.

(City or town)

(State)

under the name of Ming-Chen Yang

on Feb. 11, 1959

(Month) (Day) (Year)

on the S. S. President Wilson

(Name of vessel or other means of conveyance)

and I am now residing in

the United States pursuant to such admission. (7) It is my intention in good faith to become a citizen of the United States. (8) I certify that the photograph affixed to the duplicate and triplicate hereof is a likeness of me and was signed by me.

I do swear (affirm) that the statements I have made and the intentions I have expressed in this declaration of intention subscribed by me are true to the best of my knowledge and belief: SO HELP ME GOD.



Ming-Chen George Yang
(Original and true signature of declarant without abbreviation,
also other name if used)

Subscribed and sworn to (affirmed) before me in the form of oath
shown above in the office of the Clerk of said Court, at Lubbock, Texas, this 11th of March,

anno Domini 1963. I hereby certify that authorization for the issuance of this declaration has been received by me from the Immigration and Naturalization Service, and that the photograph affixed to the duplicate and triplicate hereof is a likeness of the declarant.

JOHN A. LOWMYER,

Clerk of the U. S. District Court

(Court)

By Jacqueline Siniard
(Jacqueline Siniard)
Deputy Clerk.

Due to an error in converting from the Chinese Calender to the Western calender, my sister and my date of birth (Ming Wei- Lena YANG, and Ming-Chen George YANG) were reported incorrectly with the Hong Kong Government, and have since then, been in error on all other documents. We wish, at this time, in filling our petition for naturalization, to correct this error, and from this day on have them change to the correct date of birth. Ming-Wei Lena Yang's correct date of birth should be January 31st, 1941 instead of January 31st, 1940, and that of Ming-Chen George Yang's should be February 3rd, 1942 instead of February 3, 1941.

The date of birth appearing on the application for petition for naturalization of the two above mentioned persons are now filled in correctly.

I am thanking you in anticipation of your kind services.

Yours sincerely,



SOCIAL SECURITY ADMINISTRATION

REPORT OF CONFIDENTIAL SOCIAL SECURITY BENEFIT INFORMATION

SOCIAL SECURITY CLAIM NUMBER

BIC

Information about a person's Social Security Benefits is confidential by law. Except under certain circumstances specified by law and regulations, the Social Security Administration does not reveal such information to any person except the beneficiary involved, or his or her authorized representative.

Beneficiary's name and address

• MING C. YANG

1. Name of person or agency from whom a request for benefit information was received.

 Beneficiary Other (Show name and address)

The person or agency named in item (1) above has requested information about your benefits. The information requested has been provided in the items checked (✓) below, and is being sent to you for your convenience. If you want the requesting agency (other than yourself) to have this information, you may show or send them this official report.

2. <input type="checkbox"/> The gross amount of your monthly Social Security benefit is	\$
The amount deducted for Medicare is	\$
The net amount of your Social Security check each month is	\$
3. <input type="checkbox"/> The above amount became effective	Month-Year
4. <input type="checkbox"/> Your monthly benefit (before deduction for Medicare)	From (month-year) Through (month-year)
5. <input type="checkbox"/> The monthly amount of your Supplemental Security Income payment is	\$
6. <input type="checkbox"/> The above amount became effective	Month-Year
7. <input type="checkbox"/> The total monthly amount of your Social Security benefit and supplemental security income payment is	\$
8. <input checked="" type="checkbox"/> According to our records your date of birth is	Month-Day-Year 02-03-1941
We are unable, at this time, to tell you whether benefits may be payable in your case, because the processing of	
9. <input type="checkbox"/> your claim for disability benefits has not been completed. If it is determined that benefits are payable, you will receive notification of the exact amount and effective date.	
10. <input type="checkbox"/> Other	Social Security Admin

APR 10 2007

San Leandro
California

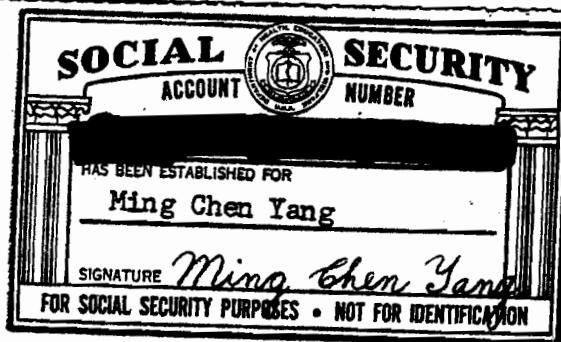
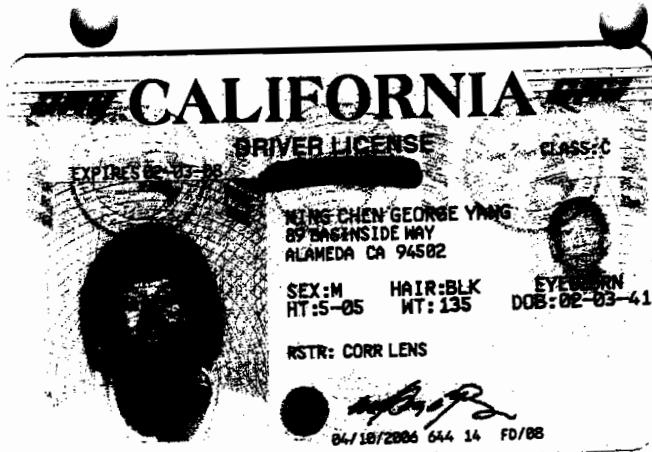
SS DISTRICT OFFICE ADDRESS
320 Davis St.
San Leandro, CA 94577-

SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL

 - SR
TELEPHONE NO. (Include Area Code)
(510) 483-7750

DATE

4-19-07



THIS IS YOUR MEDICARE CARD. IT SHOWS 3-8
IF YOU HAVE HOSPITAL INSURANCE,
MEDICAL INSURANCE, OR BOTH. IT IS FOR
YOUR USE ONLY. SHOW YOUR CARD WHEN
YOU RECEIVE HEALTH SERVICES. ON ANY
CLAIMS, BILLS OR CORRESPONDENCE BE
SURE TO USE YOUR NAME AND CLAIM
NUMBER EXACTLY AS SHOWN ON THIS
CARD.

MEDICARE

Filed 02/22/2008



HEALTH INSURANCE

Page 1 of 1

1-800-MEDICARE (1-800-633-4227)

NAME OF BENEFICIARY

MING C YANG

MEDICARE CLAIM NUMBER

SEX

MALE

EFFECTIVE DATE

HOSPITAL (PART A) 03-01-2006
MEDICAL (PART B) 02-01-2006

SIGN

HERE

*****AUTO** 3-DIGIT 945

0216 RE 03-F-029594 062

MING C YANG
89 BASINSIDE WAY
ALAMEDA CA 94502-6481

557580727M 0216 5 K



EXPRESS BENEFIT REPORT
SR 0554E (Rev. 3/2000)

California State Teachers' Retirement System
Service Retirements Division, MS 65
7667 Folsom Boulevard, Post Office Box 15275
Sacramento, CA 95851-0275

Public Service Office 1 (800) 228-5453; TDD (916) 229-3541

PLEASE READ THE INSTRUCTIONS ON THE REVERSE SIDE BEFORE COMPLETING THIS FORM.

MEMBER INFORMATION (To be completed by the Member)

*THIS FORM DOES NOT CONSTITUTE AN APPLICATION FOR ANY BENEFIT.
A SERVICE RETIREMENT APPLICATION (SR 0059) SHOULD BE FILED WITH THIS FORM.*

Name (last) YANG	(first) MINGCHEN	(initial) GEORGE	Social Security Number [REDACTED]
Address (number) 89	(street) BASINSTDE WAY	(apt no.)	Birthdate (mo/day/yr) 02/03/1941
(city) ALAMEDA	(state) CALIFORNIA	(zip code) 94502	Telephone Number (510) 521-9931
Position Title COORDINATOR OF STUDENT DISCIPLINE	Return By (mo/day/yr)		

EMPLOYER INFORMATION (To be completed by the Employer)

USE SR 0559 TO REPORT SUBSEQUENT CORRECTIONS

Report unused and excess sick leave as of the employee's anticipated last day of paid service. The member will submit this report with the retirement application. To facilitate the timely processing of benefits, please return this form to the employee before the end of the month in which they will retire. If the application is to be submitted prior to the last day of paid service, any use of sick leave subsequent to submission of this form will require that the district send a correction on form SR 0559 to assure an accurate final benefit.

County/District 0 1 0 2 8	Employer Contact Name Barbara Boyles	Employer Phone Number (510) 471-1100 X2218
Employment Termination Date (mo/day/yr) 8/3/01	Last Day of Compensation (mo/day/yr) 8/3/01	Retirement Date (mo/day/yr) 8/6/01

One year final compensation

I certify pursuant to the district bargaining agreement that the present value payment for one-year final compensation will be made to CalSTRS within 30 days of receipt of billing for the above captioned member.

Final compensation salary reduction

I certify that because of a reduction in school funds, the above member's salary was reduced during the following school year(s) _____. This member is eligible to use any three non-consecutive years for final compensation.

Unused sick leave report / excess sick leave billing

Enter days only; **do not enter hours**. If the employee has no accumulated and unused sick leave days, enter zero "0." If excess sick leave days were accumulated and unused, complete the present value calculation as instructed on the reverse side and submit amount equal to the present value to CalSTRS within 30 days following the retirement date.

Have the form signed by the Superintendent or authorized Deputy.

Accumulated Unused Sick Leave Days

Unused Excess Sick Leave Days

Contract Base Service Days

574.20

210

If the employee has unused excess sick leave, complete the present value calculation below.

Unused Excess Sick Leave Days	Contract Base Service Days	Prior Year Earnable	Present Value Factor	Present Value
_____	÷	X	_____	=

Employer Certification:

I certify that the above information is true and correct to the best of my knowledge and is in accordance with the California Education Code.

Signature (Superintendent or Authorized Deputy)

Official Title

Manager, Business Services

Date (mo/day/yr)

6/14/01

STATE OF CALIFORNIA



State Teachers' Retirement System
7657 Folsom Boulevard
O. Box 15275
Sacramento, CA 95851-0275

Toll Free - 1-800-228-5453
or - (916) 229-3870
Hearing Impaired - (916) 229-3541



EMPLOYMENT TERMINATION OR SICK LEAVE DATA CORRECTION
SR 0559 (Rev. 12/96)

Read instructions provided on reverse side before completing this form

Member Name (Last, First, Initial)	Social Security Number		
YANG, GEORGE			
County/District	Employer Telephone Number	Member's Birthdate (m/d/y)	
0 1 0 2 8	(510) 471-1100	2/3/41	

Please enter the employment termination or sick leave data as it was previously reported to STRS in the left column, and the correct date(s) or number of days in the right column. Have the form signed by the Superintendent or authorized Deputy and forward the form and the present value, if required, to STRS at the above address.

Previous Data Submitted Via:	<input checked="" type="checkbox"/> SR 0554E	<input type="checkbox"/> SR 0554	Previous Data	Corrected Data
Employment Termination Date			8 / 3 / 01	8 / 3 / 01
Last Day of Compensation			8 / 3 / 01	8 / 3 / 01
Last Day of Work			8 / 3 / 01	8 / 3 / 01
Accumulated Unused Sick Leave Days	Regular	574.20		439.20
	Excess*	-0-		135.00
	Total	574.20		574.20
Base Service Days of Contract for Final Year	210		210	

* If excess sick leave is corrected, present value must be re-calculated below.

If excess sick leave days were accumulated and unused, complete the present value calculation below.

135.00	÷	210	x	98,902.00	x	.271	=	\$17,231.29
Unused Excess Sick Leave Days		Contract Base Service Days		Prior Year Earnable		Present Value Factor		Present Value
Subtract Original Present Value							—	-0-
							\$	17,231.29
Submit Difference of Present Value to STRS or, if negative, STRS will refund.								

<input type="checkbox"/>	One-year final compensation I certify pursuant to the district bargaining agreement that the present value payment for one year final compensation will be made to STRS within 30 days of receipt of billing for the above captioned member.
<input type="checkbox"/>	Having previously certified pursuant to the district bargaining agreement for one year final compensation, I now hereby <i>repeal certification</i> for the above captioned member.
<input type="checkbox"/>	Final compensation salary reduction I certify that because of a reduction in school funds, the above member's salary was reduced during the following school years(s) / . This member is eligible to use any three non-consecutive years for final compensation.

Certification
I certify that the above information is true and correct to the best of my knowledge and is in accordance with the California Education Code.

Signature (Superintendent or Authorized Deputy)	Official Title	Date (m/d/y)
	Joe Aversano	Director, Fiscal Services
		2/6/04



Kaiser Foundation Health Plan, Inc.

April 18 ,2007

Ming Chen Yang
89 Basinside Way
Alameda, CA 94502

To whom it may concern:

According to our Membership Accounting Department, the following individual(s) are members of Kaiser Foundation Health Plan Inc:

NAME: Ming Chen Yang
DOB: 02/03/1941
GROUP: 28684
MRN: 11-1505113

Ming Chen Yang, has Senior Advantage through his group
New Haven Unified School District

If you have any questions, please feel free to contact the Customer Service Call Center at 800-464-4000.

Sincerely,


Derrick Stoots
Health Plan Representative
Fremont Member Services

NOTICE OF EMPLOYMENT Case 6:06-mc-80026 VRW Doc. 1

Page 1 of 3

12/30/77

8-NEW HAVEN UNIFIED SCHOOL DIST.

IR GEORGE YANG

435 CLIVE AVE

REMONT CA 94538

YOU ARE HEREBY NOTIFIED THAT THE FOLLOWING INFORMATION IS ON YOUR OFFICIAL PERSONNEL RECORD. PLEASE CHECK CAREFULLY AND UPDATE AS FOLLOWS.

- A. ADD OR CORRECT ANY MISSING OR INCORRECT ITEMS.
- B. ATTACH AN OFFICIAL TRANSCRIPT OF ANY ADDITIONAL UNITS OF STUDY TO BE ADDED.
- C. SIGN CORRECTED COPY AND RETURN TO YOUR SCHOOL OR DEPARTMENT OFFICE.
- D. IF CORRECTIONS OR ADDITIONS HAVE BEEN MADE, YOU WILL RECEIVE AN OFFICIAL CORRECTED COPY FOR YOUR FILE.

PAYROLL—PERSONNEL USE ONLY

TRANSACTION DATE

AUTHORIZED BY

MO DA YR

EMPLOYEE SIGNATURE

9040	[REDACTED]	M	9	02/03/41	DO	07/79	1	57	12	N	856-1863					
99	10	11	12	13	14	15	16	17	18	19	20	21	22	CONF	EX	
EMPL. NO	SOC-SEC-NO	SEX	MS	DEP	EC	CIT	BIRTHDATE	LOC	TB DATE	RETIRE	PMT	FICA	HOME PHONE			BUSINESS PHONE

7/01/63	06	1	AP	DO	03	62	.0		
35	36		37	OVER BACH	WORK LOC	40	POSITION COMP	54	
HIRE DATE	HIRE SEQ	SCHD-CLAS-STEP							

NO	CODE 50	MAJOR DESCRIPTION	CODE 51	MINOR DESCRIPTION
1				
2				
3				
4				

JOB ASSIGNMENT — COMPENSATION

ALAMEDA COUNTY SCHOOLS PAYROLL
PAYROLL MASTER CARD
NAME YANG, GEORGE

28	SOC. SEC. NO.	EXPENSE DISTRIBUTION												CERTIFIED SUBJECT MATTER AREA OR (HOURLY)			
C	M	10	0101	1100	200	251	OPTION	H D M	RATE CODE	% - RATE	TIMEKEEP LOCATION	CODE	OCCUPATION DESCRIPTION	G	R	S	RET CODE
C	M	10	0101	1100	200	251		H D M	8	100.00	010	300	TEACHER	159			
O	S	10	0121	1200	200			H R		10.23	999	316	SUM SCHTCH	009	001	001	

STREET ADDRESS LINE 1

1413 OLIVE AVE

PRIMARY JOB C/N	ANNUAL SALARY	MONTHLY SALARY	% FULL TIME	PAYMENT CODE	WARRANTY LOCATION	SUB CON
C 300	18,600.00	1,550.00	M 12	2 AMD	2	

STREET ADDRESS LINE 2

RETIREMENT CODE	MAXIMUM SERVICE TIME	EXPERIENCE	RACE	GRADES TAUGHT	TB EXPIRES
1 8.00	T 179	00 02	02 Z	K-12	07-79

CITY

STATE

ZIP CODE

HOME TELEPHONE

CODE

BANK DEPOSITING

ACCOUNT NO.

CODE

BEGIN

STOP

YR.

SALARY ADVANCE

OPTIONAL

FREMONT

CA 94538

856-1863

CODE	FRINGE BENEFITS	VACATION FACTOR	SICK LEAVE FACTOR	VACATION INCREMENT	BLS CODE	OVERTIME FACTOR	MAR STAT	CODE	AMOUNT	CODE	ALLOWANCES & EXTRA COMPENSATION	AMOUNT	CODE	AMOUNT
1					F A	1.00	S	10 A	25.00					

DEGREES	CREDITS	GROUP	RANGE	STEP	CODE	PROMOTION DATE	MONTHS EMPLOYED	NO OF PAYMENTS	1ST PAYMENT	LAST PAYMENT	DOUBLE PAYMENT AND ON	BIRTHDATE	STRS DATE	FIRST HIRE DATE
M	3	05	12	T	12/31/99	10	12	07	06			02/03/41	12	07/01/63

CT	REASON	START - TERMINATE EFFECTIVE DATE	SEX	M/S	FED W/H EXEMP	M/H/S	DE4 W/H EXEMP	NAME:	LAST	FIRST	INITIALS	SOCIAL SECURITY NUMBER
3	18	07/01/74	M	S	00		44	YANG, GEORGE			15	0557-58-0727

| District: 28

| EMPLOYEE ATTRIBUTES

| Fiscal Year: 07|

SSN: [REDACTED]	EIN:	Appl:
Last: YANG	First: GEORGE	Eff: 07/01/2004
Status: RA RETIRED AC Classification: RA RETIRED ACTIVE		Mi: Status: RETIRED AC
Type: PE PERMANENT EMPLOYEE	Work Mail:	
Title: Sex: M (M/F)	Previous Name:	
-----Mailing Address----- Restrict? Y -----Home Address-----		
Addr1: 89 BASINSIDE WAY	Addr1:	
Addr2:	Addr2:	
City: ALAMEDA	State: CA	City: State:
Cntry: Zip: 94502-0000	Zip: -	
----- P H O N E S -----		
Home: (510) 521-9931 Restrict? Y	Work: () -	Ext:
Message: () - Ext:	Car: () -	
Fax: () -	Pager: () -	
Birthdate: 02/03/1941 Age: 66 Drivers License:	Expire: / /	
Bilingual: Lang---Fluency---Translator	Lang---Fluency---Translator	

|=====| Comment: CONVERTED ON 12/11/1999

| Inquiry access only.

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